

1.0 Department of Health - Executive Director Operations**Summary**

Executive Director Operations includes those functions of the Department of Health that provide overall direction of policy, management, and administrative support to the divisions, offices, and programs of the Department. This organizational category also includes the Office of Health Data Analysis, the Office of the Medical Examiner, and Public Health Data.

Financial Summary

	FY 2000
<u>Plan of Financing</u>	<u>LFA</u>
General Fund	\$7,101,800
Federal Funds	2,372,900
Dedicated Credits	1,108,800
GF Rest. - K. Oscarson Children's Organ Transplant Trust Account	100,000
Revenue Transfer	462,100
Total	<u><u>\$11,145,600</u></u>
<u>Programs</u>	
Executive Director	\$4,030,200
Program Operations	3,066,900
Health Data Analysis	858,600
Medical Examiner	1,367,900
Public Health Data	1,822,000
Total	<u><u>\$11,145,600</u></u>

2.0 Budget Highlights: Department of Health - Executive Director Operations

2.1 Executive Director - Local Health Depts. Block Grant - UNFUNDED -

In order to help keep the local health departments able to provide services to their constituents, additional funding is needed. As an unfunded budget increase, the Analyst recommends \$300,000 to be passed through to the LHDs.

2.1 Funding

	FY 2000
<u>Plan of Financing</u>	<u>LFA</u>
General Fund	\$300,000
Total	\$300,000
FTE	0.00

3.1 Executive Director Operations - Office of the Executive Director

Summary

The Analyst recommends a budget that is based on the continuation of the current staffing level of the Executive Director's Office. The Analyst's total recommendation of \$4,030,200 is 1.0 percent below the estimated on-going FY 1999 level. The non-lapsing funds of \$112,700 are from the Local Health Public Information Network and have left the FY 1999 balance higher than would be normally. The Department expects that these funds will be spent during the remainder of FY 1999 for the last portion of the computer network project.

The 1997 Legislature approved the utilization of \$100,000 in the Children's Organ Transplant Trust Account for the purposes outlined in 26-18a-4.

3.1 Funding

	FY 1998	FY 1999	FY 2000	Difference
<u>Plan of Financing</u>	<u>Actual</u>	<u>Estimated</u>	<u>LFA</u>	<u>Est./LFA</u>
General Fund	\$3,017,800	\$3,071,883	\$3,065,100	(\$6,783)
Federal Funds	741,524	893,417	863,100	(30,317)
Dedicated Credits	4,251	7,000	2,000	(5,000)
GF Rest. - K. Oscarson Children's Organ Transplant Trust Account	100,000	100,000	100,000	0
Revenue Transfer	14,100	0	0	0
Beginning Non-Lapsing	227,490	112,700	0	(112,700)
Closing Non-Lapsing	(112,720)	0	0	0
Lapsing	81,564	0	0	0
Total	\$4,074,009	\$4,185,000	\$4,030,200	(\$154,800)
% Change		2.72%	(3.70%)	
FTE	22.9	26.8	26.5	(0.3)

Summary

The Office of the Executive Director is responsible for the overall direction of policy and management of the Utah Department of Health. The following administrative support functions also report to this office:

Legal Counsel - Provides legal counsel and support, drafts administrative rules and conducts administrative hearings. Also coordinates the Department's legislative affairs.

Human Resources Management and Employee Development - Responsible for providing personnel support services throughout the Department. Also provides administrative support for ethnic health programs.

Policy Support - Facilitates public health strategic and operational planning and coordinates issues and programs of local health departments with the Department of Health.

Public Information - Directs the release of public information to the media.

Indian Affairs - Internal and external coordination of Indian health and safety issues.

Intent Language

The 1998 Legislature approved the following items of intent language to be implemented by this division:

It is the intent of the Legislature that the Department of Health present to the Legislative Fiscal Analyst's Office, with its annual budget submission, detailed outcome measures for each budget area in each division within the department. These outcome measures shall be, whenever possible, reported in terms of outcomes achieved with the population served in addition to the report of total numbers served. The Legislative Fiscal Analyst's Office shall include the department's report including measurements within its budget presentation on an item by item basis.

Response The Department presented the required information to the Analyst shortly after its budget submission. The information is included in this book, under the tab "DOH Outcome Measurements".

Intent Language *It is the intent of the Legislature that the Department of Health, Department of Human Services, the Division of Employment Development in the Department of Workforce Services, and the State Office of Education work jointly through the regular budget process to present program budget overviews for disabilities services and for aging services to be presented to the 1999 Health and Human Services Appropriations Subcommittee. These program budget overviews will include a discussion of the most appropriate and least costly funding options.*

Response This is the second year that this intent language has been included in the appropriations act. Last year, the group mentioned in the intent language met and arrived at a comprehensive program overview for disabilities services and for aging services. These were presented to the Subcommittee during the regular budget hearings during the 1998 Session. During the last interim, this information was updated and will be presented to the Subcommittee.

Intent Language *It is the intent of the Legislature that in scheduling appropriation subcommittee meetings for the 1999 General Session, the Legislative Management Committee schedule a meeting of the FACT (Families, Agencies, Communities Together) Joint Legislative Group within the first three weeks of the General Session. It is further the intent of the Legislature that the agenda for this meeting include a review of all FACT related budget items and consideration of any appropriate recommendations of those items to the appropriation subcommittees involved with FACT.*

Response This intent language does not require any action by the Department of Health. The FACT meeting mentioned in the intent language is scheduled for February 5, 1999, which does in fact comply with the intent language. The agenda will include the review required by the language.

**Local Health
Block Grant**

A major component of the Director's Office budget is the General Fund block grant allocated by formula to Local Health Departments (LHDs). The amount in the base budget for this purpose in FY 1995 was \$1,915,500; increasing in FY 1996 to \$1,945,000. The base amount for FY 1997 was \$2,013,800 and \$1,937,000 for FY 1998. For FY 1999, the 1998 Legislature approved new funding in the amount of \$46,500 for a cost-of-living adjustment for LHD employees, matching the increase given to State employees, for a total block grant of \$1,983,500.

In addition to the General Fund block grant, the Department provides some state and federal funds to local health departments for several different categorical programs.

The Analyst has included, in Section 4.2, a map of the State divided into the 12 local health departments and tables that provide a summary of the funds allocated to local health departments by program in FY 1999 and the trends in funding for local health departments.

The Legislature appropriated \$200,000 in 1995 and \$290,000 in 1996 as one-time funding for the Public Health Computer Network. This project consists of linking computer networks of all 12 local health departments with the Utah Department of Health. The \$490,000 was designated as non-lapsing. In addition to the General Fund appropriations, the Department of Health has contributed \$85,479 in funding from its own FY 1996 appropriated base and \$52,610 from its FY 1997 appropriated base. The Department has also received a federal National Telecommunications Infrastructure Administration (NTIA) grant of \$154,952 making a total amount of \$783,041 available for the project.

The Department has expended a total of \$670,320 toward this project through the end of FY 1998. Budgeted expenditures in FY 1999 are \$112,700, the level of non-lapsing funding carried forward into FY 1999, which will utilize the remaining available funding. The projected use for the \$112,700 will include \$30,000 for the Utah Statewide Immunization Information System (USIIS), \$20,000 for a program to help the Division of Epidemiology and Laboratory Services to notify the local health departments of outbreaks of disease in a timely manner, and \$62,700 to be split evenly among the twelve local health departments for Y2K compliance assistance. The total level of expenditures

includes funding for hardware, software and consulting (training, installation, and problem solving) for the local health departments and some charges at the Department level for connections. Approximately 30 percent of the expenditures were reimbursements paid directly to the local health departments. The local health departments matched these funds with local funds to purchase hardware and software.

**Children's Organ
Transplant
Account**

The Kurt Oscarson Children's Organ Transplant Account was established in 1992 to assist families with some of the ancillary expenses involved with an organ transplant. The account is funded through a check off on the Utah State Income Tax Form. Collections from 1992 through October 1998 total \$345,578, averaging approximately \$58,600 annually. The five-member coordinating committee, established in UCA 26-18a, may award the financial assistance to eligible families. For the four fiscal years ended June 30, 1998, the committee has awarded \$77,908.49 in interest-free loans. The committee establishes terms of repayment, which may include a waiver of repayment. In the first four months of the current fiscal year, an additional \$12,043 has been expended in direct financial assistance to families. The total number of recipients who have received assistance since FY 1995 is 20.

In addition to the financial assistance, the committee has approved the expenditure of \$122,805 for marketing and public awareness campaigns, and for membership dues to Intermountain Organ Recovery. The code requires the committee to make an annual report to the Appropriations Subcommittee.

The Analyst recommends continuing the funding in the amount of \$100,000 in FY 2000 from this fund, although it is clear that annual appropriations of \$100,000 cannot continue indefinitely, when annual revenue averages \$58,600.

3.1 Budget Highlights: Executive Director

**Local Health
Departments'
Block Grant
Increase
- UNFUNDED -**

The State is a major partner with the 12 local health departments in promoting and providing public health services. Three factors call for an increase in the block grant funding. First, the state requires additional services from the local health departments, second, over time, the purchasing power of the block grant funding deteriorates, and third, a growing population puts additional demand on services from the local health departments. The Analyst recommends this increase, but because of the limited amount of revenue, is not able to provide the necessary funding.

	FY 2000
<u>Plan of Financing</u>	<u>LFA</u>
General Fund	\$300,000
Total	\$300,000
FTE	0.00

3.2 Executive Director Operations - Program Operations

Recommendation The Analyst's General Fund recommendation for this office is \$1,617,100. The total recommendation of \$3,066,900 represents an increase of 0.3 percent when compared to the FY 1998 estimated level of expenditures.

3.2 Funding

	FY 1998	FY 1999	FY 2000	Difference
<u>Plan of Financing</u>	<u>Actual</u>	<u>Estimated</u>	<u>LFA</u>	<u>Est./LFA</u>
General Fund	\$1,584,700	\$1,611,217	\$1,617,100	\$5,883
Federal Funds	1,439,204	1,267,283	1,292,500	25,217
Dedicated Credits	5,117	2,000	2,000	0
Revenue Transfer	324,841	177,300	155,300	(22,000)
Lapsing	(134,563)	0	0	0
Total	\$3,219,299	\$3,057,800	\$3,066,900	\$9,100
% Change		(5.02%)	0.30%	
FTE	44.2	45.5	45.5	0.0

Summary

The following administrative support functions are organized into Program Operations and report to the Executive Director:

Office of Fiscal Operations - Directs the following functions:

Budget - manages the preparation of the Department's annual operating and capital facilities request. Monitors expenditures within the appropriated budget.

Finance - Provides purchasing, accounting, and financial information services.

Financial Audit - Performs financial audits of contracts with outside agencies as well as internal audit activities.

Information Technology - Provides computer and communication technology support.

Employee Support Services - Provides administrative support for buildings and grounds.

3.3 Executive Director Operations - Health Data Analysis

Recommendation The 1998 Legislature restored on-going General Funds for this program in the amount of \$509,000 for FY 1999, together with funding from other sources, including \$63,000 from dedicated credits, most of which are from the sale of the data generated by the program. For FY 2000, in accordance with intent language (see below), the Analyst is recommending that the General Funding be decreased and the dedicated credits increased while maintaining total funding at a comparable level.

3.3 Funding

	FY 1998	FY 1999	FY 2000	Difference
<u>Plan of Financing</u>	<u>Actual</u>	<u>Estimated</u>	<u>LFA</u>	<u>Est./LFA</u>
General Fund	\$0	\$509,000	\$275,700	(\$233,300)
General Fund - one-time	500,000	0	0	0
Dedicated Credits	34,880	63,000	276,100	213,100
Revenue Transfer	226,178	307,000	306,800	(200)
Beginning Non-Lapsing	5,249	5,300	0	(5,300)
Closing Non-Lapsing	(5,249)	0	0	0
Lapsing	4,305	0	0	0
Total	\$765,363	\$884,300	\$858,600	(\$25,700)
% Change		15.54%	(2.91%)	
FTE	8.0	9.5	9.5	0.0

Summary In response to a growing concern for increasing health care costs, the 1990 Legislature enacted the Utah Health Data Authority Act (26-33a), which established the Utah Health Data Committee and defined its purpose "to direct a statewide effort to collect, analyze, and distribute health care data to facilitate the promotion and accessibility of quality and cost-effective health care." (26-33a-104).

In the early part of 1998, the Legislative Auditor General completed an audit of the Office of Health Data Analysis, in which it was stated that, "... the information produced by the HDA does provide a benefit by helping control costs and promoting provider accountability" and "... the information produced by HDA is satisfying the objectives set forth in legislation."

The audit went on to say, "Sufficient information exists to justify a portion of HDA's budget coming from user fees. We believe that users throughout the health care industry could pay for at least \$200,000 of the \$500,000 HDA receives from the state. For example, the former Utah Hospital Association gathered and distributed similar hospital discharge information prior to the state's involvement in health data collection. The cost of collecting and producing this information was about \$200,000 annually. The association is no longer involved in this effort, and what it once paid for is now provided through HDA's tax-funded operation. HDA's current budget is about \$640,000: \$500,000 from the State, \$100,000 from Medicaid for their work in the HMO satisfaction survey, and about \$40,000 for the sale of data products. We believe it is reasonable that all users and beneficiaries of HDA data, within the health care industry, share in the cost of funding HDA."

Intent Language

Based on the findings of the audit of the Office of Health Data Analysis, the 1998 Legislature approved the following item of intent language in House Bill 3, Supplemental Appropriations Act II, to be implemented by this division:

It is the intent of the Legislature that the Office of Health Data Analysis become self-sustaining through the sale of its data, published reports, products or services to all business, insurance, research or commercial entities to the greatest extent possible. Fees derived from the sale of these products and services shall be sufficient to generate one-half of the operating budget by the beginning of Fiscal Year 2000.

Response

The budget request presented to the Analyst did not reflect the required increase in projected dedicated credits (and corresponding decrease in State General Funds) for FY 2000. The fees for the services provided by the Office were also maintained at approximately the same level. The Utah Hospital Association has notified the Office of Health Data Analysis that it is "adamantly opposed to these

"funding options"." The Association has also threatened the Office that it would recommend that the Utah Health Data Authority be sunset this year, if such funding proposals were supported by the Health Data Committee. However, in the Analyst's response to the intent language, he has made the funding shift and requests that the Office return with revised fees to accommodate the increased dedicated credits.

Agency Response

The Office increased its fees for data products, but in anticipation of resulting reduction in sales volume, did not project a significant increase in total sales amount. In response to the intent language, the Office has taken the following actions:

First, the Office revised its fee schedule to include licensing fees renewable annually, fees for secondary release of data products, and fees for new data products. The Office also ceased waiving fees for data products and services that the Office provides to academic institutions and individuals . These changes could double the amount of fees collected, currently estimated at \$32,000, to \$64,000 if accompanied by a marketing and outreach program.

Second, the Office expects to expand its Medicaid contract (currently, \$150,000 for HMO report cards and \$150,000 for analytic services) to include the development of Medicaid HMO encounter database, bringing the total of Medicaid contracts to \$450,000. The Office also expects to be involved in the evaluation of the Children's Health Insurance Program (\$50,000), and in the development of the Utah Statewide Immunization Information System (\$50,000). For FY 1999, contracts with Medicaid and other grants, along with data sales, accounted for approximately 40% of the Office's operating budget. For FY 2000, with the expected expansions, contractual arrangements would account for approximately 50% of the Office's operating budget.

Third, the Office started to expand the services it provides to the industry. It is currently conducting analysis of the HMO satisfaction surveys for HMO's internal use. No additional revenue is expected from this because it is already covered under the Medicaid analytic services. It has the potential to generate revenue in the future if this initial project proves useful to the HMOs and leads to expanded and ongoing analytic activities. The Office also proposed to develop

an intranet for the Utah Hospitals and Health Systems Association. While some hospital leaders expressed interest, they also have indicated preference to discuss it independently of HDA's budget issue and expressed strong objection to industry funding options that the Office outlined as part of its attempt to comply with the intent language.

The Governor's budget did not make up the difference between the projected revenues from sales and services to the industry (\$64,000) and the amount indicated by the intent language (\$250,000). In the event these funds are not restored by the legislature, the Office would consider eliminating the enrollee satisfaction surveys and limit HDA's activities to hospital discharge data and those projects that are specifically funded (i.e., Medicaid, CHIP). This would severely limit the availability and quality of health care information that benefits both private and public sectors as documented by the Legislative Auditor General's 1998 audit report. The Office's information is the only source of independently-validated, publicly available consumer and market information comparing hospital, surgery centers, and HMOs.

Accomplishments

The committee reports the following accomplishments during the past two years:

Expanded collaboration and partnerships, including HMOs, UHIN, Bureau of Emergency Medical Services, Bureau of Managed Health Care, Office of Public Health Data, and the Division of Community and Family Health Services.

Developed and implemented the Utah Health Care Performance Measurement Plan including the collection, analysis, and dissemination of HEDIS performance measures from HMOs and survey of enrollee Expanded the analytical utility of the Hospital Discharge Database.

Implemented the ambulatory surgery data collection from hospitals and freestanding ambulatory surgery centers.

Collaborated on the development of the Emergency Department Database and generation of summary reports.

Expanded and enhanced its website including its internet health data query system and user friendly on-line access to all HDA publications.

1999 Plans

The Office plans on accomplishing the following initiatives during 1999:

CHIP evaluation will be integrated into the existing Medicaid and commercial managed care performance system.

A three-year trend report on results of satisfaction measures will be expanded to include other payer types.

The second year release of Health Plan Employer Data and Information Set (HEDIS) performance measures from HMOs, following audit and validation by independent subcontractors retained and funded by the HMOs.

Continue working with Medicaid to develop a complete HMO-Medicaid encounter database that will be used to provide a more complete picture of Utah HMO performance.

3.4 Executive Director Operations - Office of the Medical Examiner

Recommendation The Analyst recommends continuation of the current staffing level of the Office of the Medical Examiner, with a budget of \$1,367,900 for FY 2000. This is essentially the same on-going budget level as during FY 1999.

The Analyst recommends dedicated credits at \$61,400 to offset some of the costs of this office. The Analyst's dedicated credit estimate is based on year-to-date experience and comparison to prior years' actual receipts. The dedicated credits come from tissue harvest donations and other miscellaneous revenue.

The 1998 Legislature passed Senate Bill 10, Unidentified Deceased, which requires the OME to preserve information in determining the identity and burial location of an unidentified body. The bill funded \$15,000 in one-time capital costs and \$12,000 for on-going current expenditures.

3.4 Funding

	FY 1998	FY 1999	FY 2000	Difference
<u>Plan of Financing</u>	<u>Actual</u>	<u>Estimated</u>	<u>LFA</u>	<u>Est./LFA</u>
General Fund	\$1,264,400	\$1,310,500	\$1,306,700	(\$3,800)
General Fund - one-time	0	15,000	0	(15,000)
Dedicated Credits	60,760	61,400	61,200	(200)
Lapsing	108,888	0	0	0
Total	\$1,434,048	\$1,386,900	\$1,367,900	(\$19,000)
% Change		(3.29%)	(1.37%)	
FTE	17.5	18.4	18.4	0.0

Summary

The Office of the Medical Examiner is responsible, by statute, for the medical investigation and certification of all deaths by violence, gunshot, suicide or accident (except highway accident), sudden death while in apparent good health, unattended deaths, drug-related deaths, and cases where death may be due to a cause that may endanger the health of the general public. The Medical Examiner's area of jurisdiction is the State of Utah with a population of over 2

million. In addition to the resident population, millions of tourists visit the State each year, which is significant since the statutes also apply to residents of other states who may die while visiting in the State.

For the past few years, the appropriation has included funding to pay staff costs for their on-call coverage of the office.

The following table lists the number of cases reported to, and investigated and certified by, the Office of the Medical Examiner, for the past three years, separated according to manner of death. The table includes inquiries received where it was determined that the death did not fall under the jurisdiction of the Medical Examiner.

MEDICAL EXAMINER CASES						
	<u>FY 1996</u>	<u>% of Cases</u>	<u>FY 1997</u>	<u>% of Cases</u>	<u>FY 1998</u>	<u>% of Cases</u>
Natural Causes	1,770	70.13%	1,871	70.68%	1,893	69.96%
Accidents	245	9.71%	218	8.24%	219	8.09%
Suicides	280	11.09%	318	12.01%	317	11.71%
Undetermined	150	5.94%	181	6.84%	204	7.54%
Homicides	79	3.13%	59	2.23%	73	2.70%
Inquiries	225		332		1,080	
Total	<u>2,749</u>	100.00%	<u>2,979</u>	100.00%	<u>3,786</u>	100.00%

3.5 Executive Director Operations - Public Health Data

Recommendation The Analyst recommends a FY 2000 budget of \$1,822,000 for Public Health Data. The primary source of Dedicated Credits is the fees charged for birth certificates and other vital records.

The non-lapsing funding carried forward from FY 1998 is from a one-time appropriation in FY 1995 for a health status survey. The Analyst expects that the balance of \$37,800 will be spent during FY 1999.

Last year, the Legislature passed Senate Bill 145, Child Support Amendments, which clarifies the duty of a hospital in establishing the paternity of a child. One-time funding in the amount of \$5,000 was approved to implement the provisions of this bill.

3.5 Funding

	FY 1998	FY 1999	FY 2000	Difference
<u>Plan of Financing</u>	<u>Actual</u>	<u>Estimated</u>	<u>LFA</u>	<u>Est./LFA</u>
General Fund	\$695,300	\$842,100	\$837,200	(\$4,900)
General Fund - one-time	0	5,000	0	(5,000)
Federal Funds	281,301	304,400	217,300	(87,100)
Dedicated Credits	770,165	772,000	767,500	(4,500)
Beginning Non-Lapsing	125,376	37,800	0	(37,800)
Closing Non-Lapsing	(37,813)	0	0	0
Lapsing	102,529	0	0	0
Total	\$1,936,858	\$1,961,300	\$1,822,000	(\$139,300)
% Change		1.26%	(7.10%)	
FTE	39.1	40.3	40.0	(0.3)

Summary

The Office of Public Health Data was newly created in 1994 to bring together within one office, the bureaus of Vital Records and Surveillance and Analysis. This was done to coordinate related health data collection activities and health research projects. The mission of the office is to facilitate, coordinate, and assure the appropriate collection, analyses, and interpretation of accurate health data for surveillance, policy development, program planning, evaluation, and to register, preserve, and certify vital records.

This mission is accomplished through the following functions:

- Registration, preservation, and certification of vital records;
- Collection, tabulation, analysis, and publication of vital and other health statistical reports;
- Coordinating the efficient collection, analysis, and reporting of public health data;
- Providing wide access to data by maintaining an interactive computer information system;
- Providing training and consultation to facilitate, stimulate, and coordinate the use of data by others in the Department of Health, local health departments, and elsewhere; and
- Providing oversight in collection, use, and release of Utah health status data.

The following table shows the historical trends of vital records generated and maintained by this office.

VITAL RECORDS CERTIFICATE ACTIVITY BY FISCAL YEAR				
	<u>FY 1995</u>	<u>FY 1996</u>	<u>FY 1997</u>	<u>FY 1998</u>
Births	39,306	39,572	44,718	45,060
Deaths	10,964	11,385	12,158	11,933
Fetal Deaths	228	251	237	241
Induced Abortions	3,449	3,839	3,084	3,354
Marriages	21,892	21,073	23,580	22,128
Divorces	8,796	8,723	9,810	9,007
Ancillary Records	5,208	5,095	4,893	5,419
Other New Records	1,596	1,703	1,564	1,878
Total	91,439	91,641	100,044	99,020
Certificate Copies Issued	51,179	57,057	62,646	67,418
Fees Collected	\$558,833	\$585,346	\$615,175	\$664,186

This program received supplemental funding in FY 1995 in the amount of \$337,000 for a health status survey. The following intent language accompanied the appropriation:

It is the intent of the Legislature that . . . the appropriation to Public Health Data be considered non-lapsing.

As of November 30, 1998, \$301,651 had been spent on the collection of data from 6,369 households and 20,718 individuals and the analysis and reporting of results. The balance of \$35,349 is to be spent completing the analysis and reporting of the data. Reports published to date, include: Health Insurance Coverage, Injuries in Utah, Health Status in Utah, and Chronic Conditions in Utah. Planned future reports include: Socioeconomic Status and Health, Limitations of Activities; Interpersonal Violence; Health Care Access and Utilization; Behavioral Risk Factors; Preventative Health Screening; and Hearing, Vision, and Speech Disorders.

3.6 Executive Director Operations - Veterans' Nursing Home

Recommendation The original appropriation for the Veterans' Nursing Home was made to this line item. However, the FY 1999 appropriation designated this as a separate line item. The FY 1999 and FY 2000 budgets are shown under the next tab.

3.6 Funding

	FY 1998	FY 1999	FY 2000	Difference
<u>Plan of Financing</u>	<u>Actual</u>	<u>Estimated</u>	<u>LFA</u>	<u>Est./LFA</u>
General Fund	\$89,600	\$0	\$0	\$0
Federal Funds	127,427	0	0	0
Revenue Transfer	12,226	0	0	0
Lapsing	(202,431)	0	0	0
Total	\$26,822	\$0	\$0	\$0
% Change		(100.00%)		
FTE	0.3	0.0	0.0	0.0

4.0 Tables: Executive Director Operations

	FY 1996	FY 1997	FY 1998	FY 1999	FY 2000	Difference
<u>Plan of Financing</u>	<u>Actual</u>	<u>Actual</u>	<u>Actual</u>	<u>Rev. Estimated</u>	<u>LFA</u>	<u>Est./LFA</u>
General Fund	\$7,522,000	\$7,450,200	\$6,651,800	\$7,344,700	\$7,101,800	(\$242,900)
General Fund - one-time	0	0	500,000	20,000	0	(20,000)
Federal Funds	2,206,519	2,699,140	2,589,456	2,465,100	2,372,900	(92,200)
Dedicated Credits	726,657	785,263	875,173	905,400	1,108,800	203,400
GF Rest. - K. Oscarson Children's C	0	200,000	100,000	100,000	100,000	0
Revenue Transfer	148,266	838,114	577,345	484,300	462,100	(22,200)
Beginning Non-Lapsing	525,956	858,028	358,115	155,800	0	(155,800)
Closing Non-Lapsing	(858,028)	(956,088)	(155,782)	0	0	0
Lapsing	(107,079)	(30,663)	(39,708)	0	0	0
Total	\$10,164,291	\$11,843,994	\$11,456,399	\$11,475,300	\$11,145,600	(\$329,700)
<u>Programs</u>						
Executive Director	\$4,318,193	\$4,754,714	\$4,074,009	\$4,185,000	\$4,030,200	(\$154,800)
Program Operations	2,156,966	2,924,450	3,219,299	3,057,800	3,066,900	9,100
Health Data Analysis	740,731	773,274	765,363	884,300	858,600	(25,700)
Medical Examiner	1,279,303	1,375,821	1,434,048	1,386,900	1,367,900	(19,000)
Public Health Data	1,669,098	2,015,735	1,936,858	1,961,300	1,822,000	(139,300)
Veterans' Nursing Home	0	0	26,822	0	0	0
Total	\$10,164,291	\$11,843,994	\$11,456,399	\$11,475,300	\$11,145,600	(\$329,700)
<u>Expenditures</u>						
Personal Services	\$5,775,327	\$6,683,317	\$6,827,875	\$6,979,603	\$6,996,400	\$16,797
Travel	61,478	68,639	59,720	96,400	95,900	(500)
Current Expense	1,457,565	1,791,482	1,449,254	1,498,197	1,352,200	(145,997)
Data Processing	665,286	833,993	937,541	777,900	677,600	(100,300)
DP Capital Outlay	156,563	180,542	76,886	0	0	0
Capital Outlay	0	53,421	35,191	15,000	0	(15,000)
Pass-Through	2,048,072	2,232,600	2,069,932	2,108,200	2,023,500	(84,700)
Capital Outlay	\$10,164,291	\$11,843,994	\$11,456,399	\$11,475,300	\$11,145,600	(\$329,700)
FTE	154.33	137.30	131.91	140.49	139.91	(0.58)

4.1 Federal Funds: Executive Director Operations

	FY 2000
	<u>LFA</u>
Executive Director	
Federal Indirect	\$863,100
Program Operations	
Federal Indirect	1,257,500
WIC Program	35,000
Public Health Data	
Preventative Block Grant	66,300
VSCP Health Statistics	151,000
Total	<u><u>\$2,372,900</u></u>